

Assessment of the Pilot Test and First Year of the National Medicare & You Education Program

1998-1999

Executive Summary

The Balanced Budget Act of 1997 mandated the most significant changes to Medicare since its inception. One of these changes was the expansion of health insurance options by the creation of Medicare+Choice. To support the new program and to help Medicare beneficiaries make more informed health care decisions, the Health Care Financing Administration (HCFA) initiated the National Medicare Education Program (NMEP), called Medicare & You. The NMEP employs numerous communication vehicles to educate beneficiaries and help them make more informed decisions concerning: Medicare program benefits; health plan choices; supplemental health insurance; beneficiary rights, responsibilities, and protections; and health behaviors. A pilot program of specific NMEP activities afforded an opportunity to study and monitor the way these specific information channels function. Two key NMEP components implemented and tested in five pilot states (Oregon, Washington, Arizona, Florida and Ohio) prior to the planned nationwide implementation in Fall 1999 were the new Medicare & You Handbook and the toll-free Medicare Choices Helpline. This phased implementation allowed HCFA to improve new NMEP activities through performance monitoring and assessment prior to the nationwide implementation.

HCFA is taking a multifaceted approach to testing our overall approach to educating beneficiaries about Medicare. We have developed a performance assessment system for all elements of National Medicare Education Program (NMEP) to use for continuous quality improvement. The channel-specific assessments cover the following: print materials; toll-free telephone services (1-800-MEDICARE); the Internet (www.medicare.gov); regional education about choices in health (REACH); national alliance network; national training and support for information givers; and enhanced beneficiary counseling from the State Health Insurance and Assistance Programs (SHIP). These assessment activities identify what is working well and what needs to be improved for each of the mechanisms for communicating information about Medicare and Medicare+Choice. Additionally, we are conducting case studies in five communities in the five pilot states (Dayton, OH, Eugene, OR, Olympia, WA, Sarasota, FL, and Tucson, AZ), and in one community (Springfield, MA) outside the five pilot states, in order to describe the evolution of the NMEP in these six communities and identify "best practices" that could be used in other areas. The case studies add to our other assessment activities by providing information about how all of the activities related to the NMEP work together at the local level. We are continuing to monitor the case study sites over time.

To evaluate the impact of the NMEP at the national level, we have added a supplement to the winter round of the 1999 Medicare Current Beneficiary Survey

(MCBS). This supplement will gather information about the ability of beneficiaries to obtain Medicare information when they need it, and about their awareness and understanding of Medicare and Medicare+Choice messages. We will be repeating this supplement in subsequent years. Since the MCBS only surveys current enrollees, we have developed separate surveys for new enrollees and for new health plan members addressing the same issues.